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## APPLICANTS

Roland Lamer, Evanston, IL;  
Theodore Anagnost, Skokie, IL;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/474,569 12/29/1999

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/10/2000

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 8	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged Examiner's Signature Initials				

## ADDRESS

Joseph D. Kubborn  
Andrus, Sceales, Starke, & Sawall  
100 East Wisconsin Ave.  
Ste 1100  
Milwaukee, WI53202

## TITLE

DATA MANAGEMENT SYSTEM FOR PATIENT DATA

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